

Adult & Older Adult 15 Year Transformation

Adult & Older Adult Behavioral Health Services

1998	2013
Adult and Older Adult outpatient budget- \$80 million	\$180,701,172
Case Management budget - \$5.9 million	\$33.7 million in funding for case management and expanded Full Service Partnership programs
Medical model based	Recovery based
Separate mental health and alcohol and drug services	Mental Health and Alcohol and Drug Services administration, contracts and programs are all managed by Assistant Deputy Director
No strategic plans and initiatives on the integration of rehabilitation and recovery practices.	Initiatives on: <ul style="list-style-type: none"> • Behavioral Health Integration • primary care and mental health service integration • supported housing and employment • stigma reduction campaign • recovery based services • geriatric mental health • co-occurring disorders • transition age youth services
Few psychosocial rehabilitation and recovery services.	All programs offer an array of recovery services.
5 Clubhouses.	There are currently 14 clubhouses including one for the deaf and hard of hearing
Dual Diagnosis - we did not have an integrated clinical assessment.	Current behavioral health assessment is fully integrated and over 40% of clients report a dual diagnosis.
No program staff trained on co-occurring disorders.	462 staff from 107+ programs have been trained in co-occurring disorders through the County's CCISC. Additional contract staff have been trained to provide the CCISC training to staff in their various programs. There are more than 300 active CCISC CADRE members.
No integrated culturally competent clinical assessment.	A Cultural Competence Handbook has been developed for providers.
Wait times for a routine appointment ranged 14-28 days.	Wait time is under 2 days on average, down from 7 days 5 years ago.
No consumers at the table.	In addition to specific programs that are consumer or family-operated and other consumer participation at all levels, there are over 104 peer support specialists employed throughout the system of care.
No supportive housing for homeless individuals with serious mental illness.	<ul style="list-style-type: none"> • 6 programs provide supported housing to over 1,100 clients. • MHSA/Permanent Supported Housing Program with \$33 M for 232 new units of permanent supportive housing.
No supportive employment services for consumers.	There are integrated employment services in 8 full service partnership programs with over 17% employed clients, in addition to two stand-alone employment programs.
4 crisis residential treatment programs.	Currently there are 6 crisis residences with a 7 th expected to open in late FY 13-14.
Antiquated Management Information System.	An Electronic Health Record (Anasazi) has been implemented.
No Primary Care & Mental Health Services Integration	Primary Care & Mental Health Services Integration in 18 Community Health Centers (paired with 23 mental health clinics).